

NOBORI BIFURCATION STUDY

i2 Poster Contributions

Georgia World Congress Center, Hall B5

Monday, March 15, 2010, 9:30 a.m.-10:30 a.m.

Session Title: Intravascular Diagnostics and Complex Lesions

Abstract Category: PCI - Bifurcations

Presentation Number: 2503-433

Authors: *Gian Battista Danzi, Sr., Fina Mauri Ferre, Petr Kala, Marcus Wiemer, Farzin Fath-Ordoubadi, Rene Koning, Didier Carrie, William Wijns, Javier Goicolea Ruigomez, Nick West, Antonio Serra, Zoran Perisic, Nikola Jagic, Vladimir Miloradovic, Ospedale Maggiore Policlinico, Milan, Italy*

Background: Nobori is a new generation drug eluting stent, coated only abuminally with a biodegradable polymer and Biolimus A9. Bifurcation lesions represent a particular challenge for PCI treatment, with in general inferior results compared to non-bifurcated lesions, despite use of various treatment strategies.

Methods: The NOBORI 2 is a large multicentre registry of consecutive patients treated with Nobori stent. The primary endpoint is the composite of cardiac death, MI and TLR at 1 year. Among the first 1000 patients treated in this study 175 had at least one bifurcation and those patients were compared with patients without bifurcation. All adverse events are adjudicated by independent event committee.

Results: Baseline demographic characteristics were comparable between both groups, except for male gender which was more represented in bifurcation group (88% vs. 80%, $p=0.003$). Number of lesions treated (1.73 vs. 1.39, $p<0.0001$), and number of stents implanted per patient (2.06 vs. 1.65, $p=0.0012$) were significantly higher in the bifurcation group, with more frequent compromised sidebranch in the bifurcation group (5.9% vs. 1.3%, $p<0.0001$). Lesions in the bifurcation subgroup were more complex (type B2/C 91.7% vs. 67.5%, $p<0.001$) and more frequently located in the left coronary system (84.0% vs. 64.6%, $p<0.001$). There was no significant difference between groups for both pre- and post-procedure RVD, MLD and % diameter stenosis at baseline. MACE rate was low in both groups up to 6 months (4.3% vs. 3.7% in bifurcation and non-bifurcation group respectively). Stent thrombosis rate was 0.7% and did not differ significantly between the groups. One year follow-up is ongoing and results will be available at the time of presentation.

Conclusions: Preliminary 6 months results of patients treated with Nobori stent in bifurcation and non-bifurcation subsets are very encouraging. Low rates of death, MI, TLR and stent thrombosis were observed, despite very complex lesion characteristics.